

BEGINNING OF DECONSTRUCTION NOTICE FORM Vessel Deconstruction General Permit

Please print or type all sections of this application. All fields are required unless otherwise marked.

I. Permit Number:					
II. Operator/Permittee (Party with operational control over plans and specifications or day-to-day operational control of activities which ensure compliance with Deconstruction and Site Management Plan (DSMP) and permit conditions. Ecology will send correspondence and permit fee invoices to the permittee on record.)					
Name:		Company:			
Business Phone:	Ext.	Unified Business Identifier (UBI): (UBI is a nine-digit number used to identify a business entity.			
Cell Phone (Optional):	Fax (Optional):				
E-mail:		Write "none" if you do not have a UBI number.)			
Mailing Address:		City:	State:	Zip + 4:	
III. Property Owner (The party listed on the County Assessor's records as owner and taxpayer of the parcel[s] where deconstruction will occur. Ecology will not send correspondence and permit fee invoices to the Property Owner. The Property Owner information will be used for emergency contact purposes only.)					
Name:		Company (if applicable):			
Business Phone:	Ext.	Unified Business Identifier (UBI):			
Cell Phone (Optional):	Fax (Optional):	(UBI is a nine-digit number used to identify a business entity.			
E-mail:		Write "none" if you do not have a UBI number.)			
Mailing Address:		City:	State:	Zip + 4:	
IV. On-Site Contact Person (Typically the Qualified Marine Professional or Operator/Permittee)					
Name:		Company:			
Business Phone:	Ext.	Mailing Address:			
Cell Phone (Optional)	Fax (Optional):	City:	State:	Zip + 4:	
E-mail:					
V. WebDMR (Electronic Discharge Monitoring Reporting)					

You must submit monthly discharge monitoring reports using Ecology's WebDMR system. To sign up for WebDMR, or to register a new site, go to https://ecology.wa.gov/webportalhelp. If you are unable to submit your DMRs electronically, you may contact Ecology to request a waiver. Ecology will generally only grant waiver requests to those permittees without internet access. Only a permittee or representative, designated in writing, may request access to or a waiver from WebDMR. To have the ability to use the system immediately, you must submit the Electronic Signature Agreement with your application. If you have questions on this process, contact Ecology's WebDMR staff at www.webDMR-Stormwater@ecy.wa.gov or 360-407-7097.

To request materials in a format for the visually impaired, visit https://ecology.wa.gov/accessibility, or call Ecology's ADA Coordinator at 360-407-6831, Relay Service 711, or TTY 877-833-6341.

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VI. Site Information				
Vessel or Project Name	Vessel Description Total vessel length:feet Estimated gross tonnage:tons (USCG Guide)			
Estimated project start-up date (mm/dd/yy):	Describe the condition of the vessel (For example, floating or submerged, safe to tow, etc.) List any anticipated waste streams (For example, asbestos, oil and			
Estimated project completion date (mm/dd/yy):	fuel, polychlorinated biphenyls (PCBs), lead, mercury, etc.) If no anticipated waste streams are listed, please explain:			
VII. Additional Submittal Requirements				
This Beginning of Deconstruction Notice is incomplete and cannot be approved until the following documents are				
received by Ecology: 1. Have you attached a Solid Waste Disposal Plan to this application? Yes No*				
 Have you attached a Deconstruction and Site Management Plan including testing of anticipated waste streams to this application? Yes No* 				
*If you answered no to any of the above questions, please explain below or on a separate paper .				
VIII. Certification of Permittees				
"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."				
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Printed Name / Company (operator/permittee only)	Title			
Signature of Operator/Permittee*	 Date			
* The permit requires this application is signed by one of the following: A. For a corporation: By a principal executive officer				
B. For a partnership or sole proprietorship: By a general partner or the proprietor, respectively				
C. For a municipality, state, federal, or other public facility:	By either a principal executive officer or ranking elected official			
Please sign and return this document to the following address: Washington Department of Ecology Water Quality Program – Vessel Deconstruction PO Box 47696 Olympia, WA 98504-7696	١			

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